FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION OMB APPROVAL

OMB Number:

3235-0076

Expires:

April 30, 2008

Estimated average burden hours per response

1.00

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THOMSON REUTERS **UE8** Name of Offering ([] check if this is an amendment and name has changed, and indicate change.) Common Stock Financing - Pipe Round Mail Processing :Honion Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) [] ULOE Type of Filing: [X] New Filing [] Amendment all, the other A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Weshington, DG 140.0) Name of Issuer ([]) check if this is an amendment and name has changed, and indicate change.) TWL Corporation Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (In 4101 International Parkway, Carrollton, Texas 75007 (972) 309-4210 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (In (if different from Executive Offices) Same (972) 309-4210 **Brief Description of Business** Training and Educational Services Type of Business Organization [x] corporation] limited partnership, already formed [] other (please specify): [] business trust [] limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: [0][4] [7][5] [X] Actual [] Estimated

GENERAL INSTRUCTIONS

Jurisdiction of Incorporation or Organization:

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR230.501 et seq. or 15 U.S.C. 77d(6).

(Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer, and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

^{*}Issuer was originally incorporated in the State of Oklahoma in April 1975, and was reincorporated in the State of Nevada in November 2007.

Δ	RASIC	IDENTIFIC.	ATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of
 the issuer;
- · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Beneficial Owner [X] Executive Officer General and/or Managing [] Promoter Director [] Partner Full Name (Last name first, if individual) Quinn, Patrick R. Business or Residence Address (Number and Street, City, State, Zip Code) 4101 International Parkway, Carrollton, TX 75007 Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [X] Executive Officer [X] Director General and/or Managing Partner Full Name (Last name first, if individual) Cagan, Laird Q. Business or Residence Address (Number and Street, City, State, Zip Code) 10600 N. De Anza Blvd., Suite 250, Cupertino, CA 95014 Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [] Executive Officer [] Director General and/or Managing Partner Full Name (Last name first, if individual) Garden State Securities, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 1540, Route 138, Suite 303, Wall Township, NJ 07719 General and/or Managing Check Box(es) that Apply: [X] Promoter [] Beneficial Owner [] Executive Officer Director Partner Full Name (Last name first, if individual) Chadbourn Securities, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 9191 R.G. Skinner Pkwy, Suite 501, Jacksonville, FL 32256 General and/or Managing Check Box(es) that Apply: [] Promoter [] Beneficial Owner [X] Executive Officer [X] Director Partner Full Name (Last name first, if individual) Farragut, Phyllis Business or Residence Address (Number and Street, City, State, Zip Code) 4101 International Parkway, Carrollton, TX 75007 General and/or Managing Check Box(es) that Apply: [] Promoter Beneficial Owner Description [] Executive Officer [X] Director Partner Full Name (Last name first, if individual) Losty, Mary Business or Residence Address (Number and Street, City, State, Zip Code) 1418 Lockhart Way, Roseville, CA 95747

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA - continued

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;

Business or Residence Address (Number and Street, City, State, Zip Code)

4101 International Parkway, Carrollton, TX 75007

- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

 Each general and mana 	ging partner of pa	artnership issuers.				
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	[]	General and/or Managing Partner
Full Name (Last name first, if Thau, Richard G.	individual)					
Business or Residence Addres 4101 International Parkway	s (Number and , Carrollton, T	d Street, City, State, Zip X 75007	Code)			
Check Box(es) that Apply:	[]Promoter	[] Beneficial Owner	[X] Executive Officer	[X] Director	[]	General and/or Managing Partner
Full Name (Last name first, if Cagan, Dennis	individual)					
Business or Residence Address	s (Number an	d Street, City, State, Zip	Code)		·	
4101 International Parkwa	y, Carrollton, T	X 75007				
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[X] Executive Officer	[X] Director		General and/or Managing Partner
Full Name (Last name first, if	individual)			-		
Hammett, Daniel						

				B. IN	FORMA	TION AB	OUT OF	ERING	<u> ,</u>			
1. Has the	issuer sold,	or does the	issuer inter	nd to sell, to	non-accre	dited invest	ors in this of	ffering?	*****			Yes No [] [X]
				Answer al	so in Appe	ndix, Colun	nn 2, if filing	g under ULC)E			
2. What is	the minimu	m investme	ent that will	be accepted	d from any	individual?			***************************************			\$ 50,000
3. Does the	e offering pe	ermit joint o	ownership o	of a single u	nit?		***************************************	*******				Yes No[X]
4. Enter the similar is an broke	e information ar remunera associated r	on requeste tion for sol person or ag If more th	d for each picitation of gent of a broad five (5)	person who purchasers oker or deal persons to b	has been of in connecti	r will be pa on with sale		directly or i	indirectly, a fering. If a or states, l	any commis person to b	sion or e listed e of the	
,	Last name in Securities		vidual)									
	Residence A				, State, Zip	Code)			···			
Name of As	ssociated Br	oker or Dea	aler				_					
	hich Person "All States"											[] All States
[AL] [IL] [MT] [R1]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	(CA) (KY) (NJ) (TX)	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	MI OH [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Cagan, La	(Last name ird Q. Residence			Street, City	, State, Zip		<u>.</u>	_		<u>,</u>		
	e Anza Blv ssociated Br			no, CA 950	014			-				
Chadbouri	n Securities	, Inc.										
	hich Person "All States"			ates)						•••••••••••••••••••••••••••••••••••••••		[] All State:
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	(CT) (ME) [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	FL MI [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
	Last name ate Securiti		vidual)									
	Residence e 138, Suite					Code)						
Name of As	ssociated Br	oker or De	aler									
	hich Person "All States"											[] All State
(AL) [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	(CA) (KY) [NJ] [TX]	(CO) [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	DE [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	{FL} [MI] [OH] [WV]	{GA} [MN] [OK] [WI]	(HI) [MS] (OR] (WY)	(ID) [MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEE	DS
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate Offering Price	Amount Already Sold
	Type of Security	Offering Price	Solu
	Debt	\$ <u>-0-</u>	\$ <u>-0-</u>
	Equity	\$ <u>_6,000,000</u>	\$ _1,200,000
	[X] Common [] Preferred		
	Convertible Securities (including warrants) Up to 600,000 warrants exercisable at \$1.00 per share, and common stock issuable upon exercise thereof	\$_600,000	\$0
	Partnership Interests	\$	\$0
	Other (Specify)	\$0	\$0-
	Total		\$_1,200,000
		\ <u></u>	-
•	Answer also in Appendix, Column 3, if filing under ULOE		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	3	\$_1,200,000
	Non-accredited Investors		\$0-
	Total (for filings under Rule 504 only)		\$_1,200,000
	Answer also in Appendix, Column 4, if filing under ULOE		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities of this offering. Classify securities by type listed in Part C - Question 1.	Type of Security	Dollar Amount Sold
	Type of offering Rule 505	N/A	· C
			\$ \$
	Regulation A		\$
	Rule 504		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		5
	Transfer Agent's Fees	[] \$
	Printing and Engraving Costs	[] \$
	Legal Fees	13	x] \$ <u>30,000</u>
	Accounting Fees.	ſ] \$
	Engineering Fees	ſ	} \$
	Sales Commissions (specify finders' fees separately) maximum estimated	rs rs	() \$ <u>600,000</u>
	Other Expenses (identify)	S] \$
	Total	[2	K] \$ <u>630,000</u>

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXP	ENSE	S AND USE OF PR	OCEE	DS
4.	b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."				\$ <u>5,970,000</u>
	5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.				
			Payments to Officers, Directors, & Affiliates		Payments To Others
	Salaries and fees	[]	\$	[]	\$
	Purchase of real estate	[]	\$	[]	\$
	Purchase, rental or leasing and installation of machinery and equipment	[]	\$	[]	\$
	Construction or leasing of plant buildings and facilities		\$	[]	\$
	Acquisition of other business (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]	\$	[]	\$
	Repayment of indebtedness	[]	\$	[X]	\$ 1,500,000
	Working capital		\$	[X]	\$ <u>3,470,000</u>
	Other(specify): misc vendor payables		\$	[X]	\$ <u>1,000,000</u>
		{}	\$. []	\$
	Column Totals	[]	\$	[X]	\$_5,970,000
	Total Payments Listed (column totals added)			[X]	\$ <u>5,970,000</u>
_	D DEDEDAL CIONATU	IDE			
	D. FEDERAL SIGNATU ssuer has duly caused this notice to be signed by the undersigned duly authorize ure constitutes an undertaking by the issuer to furnish to the U.S. Securities and				

Date

June 2, 2008

ATTENTION

Signature

Title of Signer (Print or Type)

Chief Financial Officer

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

Issuer (Print or Type)

TWL Corporation

Patrick Quinn

Name of Signer (Print or Type)

F	ST	'Δ'	rF	SI	GN	JΔ	TI	IR	F
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1.	Is any party described in 17 CFR 230.262(c), (d), (e) or (f) presently subject to any of the disqualification provisions	Yes	š	No	0
	of such rule?	.[]	[X]

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
TWL Corporation	total Jum	June 2, 2008
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Patrick Quinn	Chief Financial Officer	
7		

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2 3 Type of Security				4			5 Disqualification under State ULOE			
	to non-a investor	to sell ccredited s in State -Item 1)	Type of Security and aggregate offering price offered in state (Part C-Item 1)		Type of invamount purch (Part C-	vestor and ased in State Item 2)		(if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No	Common Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No		
AL											
AK											
AZ				·							
AR											
CA		X	\$800,000	1	\$800 000	None			X		
со											
СТ											
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GA											
НІ											
ID									_		
IL											
IN											
ΙA											
KS											
KY											
LA											
ME											
MD		Х	\$400,000	2	\$400,000	None			Х		
MA											
MI											
MN											
MS											
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,				APPEN	DIX						
1	Intend to non-ac investors (Part B-	to sell ecredited in State	Type of Security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Common Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No		
MT											
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